



2011 Fall Youth & Adult TENNIS LESSONS



Lessons begin the week of **October 3rd** for (6) weeks.
Lessons will be held at the Franklin County Parks & Recreation Tennis Courts.
Cost of tennis lessons is **\$60.00** per student.

***Deadline to register for these lessons is Tuesday, September 27, 2011!**

***Classes may be combined depending on registration numbers!**

LESSONS SCHEDULE

(Please check the appropriate class!)

☐ **YOUTH TENNIS LESSONS—** Ages 6-8 **Tuesday's** 6:00pm-6:45pm
***This class begins on Tuesday, October 4, 2011!**

☐ **YOUTH TENNIS LESSONS—** Ages 9-12 **Tuesday's** 7:00pm-8:00pm
***This class begins on Tuesday, October 4, 2011!**

☐ **ADULT TENNIS LESSONS—** Ages 13 & over **Thursday's** 6:30pm-7:30pm
***This class begins on Thursday, October 6, 2011!**

Mr. Pete Hofsteter, a previous USTA Senior State Hardcourt Champion, will be overseeing the Spring Tennis Lessons. Pete has over (20) years experience in tennis techniques and awaits to teach this lifetime sport.

TO REGISTER: Please complete the back of this form and mail the **\$60.00** fee to:
(make checks payable to Franklin County Parks & Recreation)

Franklin County Parks & Recreation
2150 Sontag Road
Rocky Mount, VA 24151
540-483-9293 office 540-483-0040 fax

For Additional Information:

Please call **Pete Hofsteter**, instructor, at 540-797-5253.

Franklin County Parks and Recreation Registration and Liability Waiver Form – 2011 FALL TENNIS LESSONS

Participant's Name: _____

Home Phone: _____

Address: _____

Work Phone: _____

City: _____

Cell Phone: _____

Zip Code: _____

Date of Birth: _____

Email Address: _____

Age: _____

Circle Appropriate Age Group: **Ages 6-8** **Ages 9-12** **Ages 13 & over**

I understand the importance of following all rules and regulations relating to this activity, including the instructions of the person/or persons supervising this activity and/or the requirements of the person or entity responsible for the area where the activity is to take place. I agree to follow and comply with all such rules, regulations, instructions, and/or requirements.

I understand that it is important that I be in good physical condition when I agree in the activity, and understand that it is my responsibility to maintain an activity level that is compatible with my physical condition and skill level.

I hereby expressly assume the risk of any physical injury or other loss that I might sustain as the result of participating in this activity and any transportation related thereto. I further understand that there may be risk of injury in traveling to and from the area where the activity will take place.

I also expressly waive and covenant not to sue on any claim I might have against the County of Franklin, or any officer or employee of the County, or any volunteer, or the estate or representatives of such persons for any personal injury or loss that I might sustain as the result of engaging in any activity relating to this program whether caused by negligence, breach of contract, or otherwise: except that this waiver shall not apply to any claim I might have against the County (or its agents) for any such personal injury or loss I might sustain arising out of gross or wanton negligence of any such person or entity.

I also agree that by participating in this event any pictures that are taken of me or child may be used in publications and for publicity purposes through Franklin County Parks & Recreation.

Signature of Participant _____
(if participant is under 18 years of age then must have a guardian's signature)

I have the following physical impairments or medical conditions, including allergic reactions:

Current medications that participant is taking now:

Name of Emergency Contact : _____

Phone Number of Emergency Contact : _____